

The Public's HEALTH

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Adolescents Need Constant and Caring Adults in their Lives

by Jan Shedd, M.Ed.

Adolescence can be a complicated and even scary time for kids and parents, but with information and confidence parents and other adults can make a real difference in the lives of teens.

Success for an adolescent often depends on a consistent and caring adult in his or her life. HEALTH's Office for Family, Youth and School Success focuses on providing parents, school personnel and other adults with the information and resources needed to meet the developmental needs of preteens and teens.

Despite the popular characterizations, most teenagers avoid having sex, doing drugs or engaging in violent action. But many families and schools still struggle with these behaviors and their consequences.

We all want children to avoid trouble and achieve success. Research shows that the kids who do well have good relationships with their parents and value education.

They do better in families and schools with clear rules and consequences and with someone who monitors their

whereabouts. They do better when they make constructive use of their time, learn positive values and enjoy a sense of purpose.

HEALTH educates and supports adults who have contact with adolescents, and strengthens communities and their schools. For example, HEALTH:

- Funds a creative program called Men 2 B that trains and supports men to be more effective and confident role models for the boys they interact with in various natural settings.
- Participates with sister state agencies and community-based agencies to provide "Can We Talk" parenting skills workshops in schools and other settings throughout the state.
- Implements an on-line directory of information and resources just for parents of 9- to 17-year-olds.
- Facilitates professional development opportunities for school personnel to learn "best practices" for safe, healthy and nurturing schools.
- Supports school-based health centers (SBHCs) and school-linked services. SBHCs reduce absenteeism and drop out rates by providing physical and behavioral health services to students with easy access and sensitivity to teen concerns.
- Participates in a statewide alliance to develop community schools and after-school programs. Out-of-school time programs are opportunities for youth to build meaningful relationships with caring adults in supervised settings. They also provide academic enhancement, community service opportunities, recreation and physical fitness, and nutritious foods.



Several young men active in community youth organization recently completed the Men 2 B training program and received their certification.

Increasing Participation in the Early Intervention Program Through Social Marketing

by Andrea Bagnall Degos, MPH

Children grow and learn at different rates. However, most children develop basic skills by a certain age (for example sitting, crawling, walking, and talking). When a child doesn't develop skills at the expected age, this is called a developmental delay.

Identifying and addressing a developmental delay early in a child's life can minimize the difficulties caused by the delay and help the child reach his or her full potential. The Early Intervention Program serves children with developmental delays from birth to age three. Early Intervention (EI) supports these children and helps them and their families face their challenges.

In January 2001, HEALTH found that many eligible families were not utilizing the services. People who spend the most time with a child (for example parents, child care providers, or health care providers) usually notice a developmental delay first and therefore most often refer a child to the program. EI staff suspected that families and others were largely unaware of the program.

The program decided to use social marketing to increase participation, starting with formative research among parents of young children, childcare providers, and pediatric health care providers to identify the problems contributing to low program participation. Research confirmed that families and potential referral sources did have

questions about the program. Many were unaware of the services provided or how to make a referral.

Based on the findings, Family Health's communications staff developed a program logo and three sets of tailored educational materials—one for parents and families, another for childcare providers and a third for doctors. In addition, they designed two posters: one for program outreach and one for educating about developmental milestones. Lastly, the team created a Website. They tested their materials with target audiences and made revisions based on the feedback received.

HEALTH distributed materials through mailings to childcare providers and office visits to doctors. An ongoing evaluation process kept the information focused and current.

Working closely with families, childcare providers, leaders in the pediatric health field and local Early Intervention providers proved to be an invaluable component of the project. The social marketing approach helped make this campaign a success by involving the target audiences as key participants in its design and implementation.



Sharing the shots

by Susan Shepardson, MA

Preschool vaccines and a childhood fever with a rash don't ensure an immunity to contagious diseases. High school graduates need protection from meningitis and tetanus before leaving for college dorms or any other group living situation. Their grandparents, in addition to the annual flu vaccine, can improve their odds for healthy senior years with pneumonia vaccine and tetanus/diphtheria boosters every five years and a chickenpox vaccine (which may protect against shingles) if they can't remember that particular spotted interlude from childhood.

At an intergenerational free Immunization/Family Wellness Fair in August at the Warwick Mall, 100 of this year's college freshmen received meningitis vaccine and 10 also had their tetanus/diphtheria immunity boosted. In the booth next door, 73 seniors received pneumonia vaccines and 19 requested tetanus/diphtheria boosters.



The HEALTH-sponsored fair also offered information on nutrition, parenting, cancer screening, exercise and numerous other health issues.

Good News for the Sandbox Set

While their big brothers and sisters and grandparents line up for vaccines, infants and toddlers in Rhode Island celebrate the arrival of Pediarix™, a vaccine that combines several vaccines into one shot and reduces the number of shots for the pre-school crowd by five. By the age of two, most children receive 21 vaccinations, protecting them from 11 harmful diseases, with boosters yet to come.

HEALTH also recommends that children receive annual flu vaccinations. Although seldom experiencing even mild flu symptoms themselves, children in daycare and school frequently carry the flu virus home to parents and grandparents.

The Rhode Island Department of Health stockpiles most childhood vaccines, including the new Pediarix™, for pediatricians, family practitioners and community clinics.

School Nurse Teachers Provide Healthy Havens

by Rosemary Reilly-Chammat, MPA

The practice of using schools to address health needs of children probably began in the earliest days of group education. All societies accept the link between academic success and positive health outcomes. HEALTH's partnership with school nurse teachers and our continued support for additional school-based health centers and Child Opportunity Zones where they are needed will help ensure that all Rhode Island's children can enjoy the benefits of a healthy lifestyle.

The interrelationship between health and education forms a mutually supportive and reinforcing cycle for successful communities

Society has a long-standing interest in the health of school age children. We want all children to come to school ready to learn and for all children to leave school ready to lead productive lives. We know that children who are healthy can learn better. Children who enjoy learning are more likely to stay in school. Children who stay in school have better health outcomes in their adult lives. Adults who practice healthful behaviors teach children the value of a healthy lifestyle. And the cycle continues.

School nurse teachers top the list of critical partners in achieving this mission. The Rules and Regulations for School Health Programs describe the schools responsibility for population-based

services such as health screenings and for individualized health services such as medication administration. HEALTH works with school nurse teachers to implement the regulations and provide professional development for new and emerging issues.

When the student population needs more than the minimum requirements, schools may choose to house additional supportive services at the school. Seven schools in Rhode Island have school-based health centers which provide physical and behavioral health services to students on site. They are operated by the state's Community Health Centers.

In addition, ten Child Opportunity Zones in Rhode Island link schools with off-campus health and social services for children and their families. School nurse teachers play a critical

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*Safe and Healthy Lives in Safe
and Healthy Communities*